

Indiana Healthcare Associated Infection Initiative

Healthcare Associated Infection: *Catheter Associated Urinary Tract Infection*

Facility Name: _____ Team Leader: _____

Initiative Goals (by December 31, 2011)

1. 12% reduction in Catheter Associated Urinary Tract Infection rate

Facility based AIM Statements (By December 31, 2011)

☐ Reduce number of catheterization days by _____%.

☐ Other _____

| Change Strategies: | Who: Is responsible | When: Will it occur | Where: Will it occur | Indication: of Success |
|--|--|----------------------------|-----------------------------|--|
| 1. Example: Implement a "Catheter Card" – a laminated card carried by staff that has approved reasons for catheterization on one side and a daily review checklist on the other. | 1.1 DON develops card | 1.1 November 30, 2010 | 1.1 Med/Surg Unit | 1.1 Card developed |
| | 1.2 ADON provides card implementation training at staff in-service, card is inserted into new hire training/ orientation | 1.2 December 31, 2010 | 1.2 Med/Surg Unit | 1.2 In-service provided, training/orientation materials updated, staff able to produce card when requested |
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Healthcare Associated Infection: *Catheter Associated Urinary Tract Infection (continued)*

| <i>Change Strategies:</i> | <i>Who: Is responsible</i> | <i>When: Will it occur</i> | <i>Where: Will it occur</i> | <i>Indication: of Success</i> |
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